

021104
16569 U.S.P.T.O.322856 U.S.P.T.O.
10/776376

021104

**UTILITY PATENT APPLICATION
TRANSMITTAL**

(For new nonprovisional applications under 37 CFR 1.53(b))

*Attorney Docket No. FA 1179 US NA**First Named Inventor or Application Identifier***Carmen Flosbach et al.****"EXPRESS MAIL CERTIFICATE"****"EXPRESS MAIL" MAILING LABEL NUMBER ER 430765520 US****DATE OF DEPOSIT: February 11, 2004**

I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to Mail Stop: Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

NAME OF PERSON MAILING PAPER OR FEE
(TYPE OR PRINT) Jeannette Y. RayfieldSIGNATURE SIGN Jeannette Y. Rayfield**APPLICATION ELEMENTS**

See MPEP chapter 600 concerning utility patent application contents.

1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to Deposit Account No. <u>04-1928</u> .	9. <input checked="" type="checkbox"/> The Title of the Invention: Polyurethaneurea Resins With Trialkoxysilane Groups And Processes For The Production Thereof
<input checked="" type="checkbox"/> General Authorization to charge any and all fees under 37 CFR 1.16 or 1.17, including petitions for extensions of time, relating to this application. (37 CFR 1.136(a)(3)) <i>(Submit an original, and a duplicate for fee processing)</i>	10. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <ul style="list-style-type: none"> a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies d. <input type="checkbox"/> Use the identical computer-readable form filed in Application No. _____, filed _____ as the computer-readable form for the instant application. (37 CFR 1.821(e))
2. <input type="checkbox"/> A Check in the Amount of \$ _____ is enclosed	
<input type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required and credit any overpayment to Deposit Account <u>04-1928</u> .	
3. <input checked="" type="checkbox"/> The total fee is calculated as shown below:	ACCOMPANYING APPLICATION PARTS
Basic Filing fee \$ 770.00	a. <input type="checkbox"/> Information Disclosure Statement (IDS)
Total Claims 8 - 20 = 0 x \$18 \$ 0.00	b. <input checked="" type="checkbox"/> Form PTO/SB/08a
Independent Claims 1 - 3 = 0 x \$86 \$ 0.00	c. <input type="checkbox"/> Copies of all IDS Citations
<input type="checkbox"/> Multiple Dependent Claim present \$ 0.00	
TOTAL FILING FEE <u>\$ 770.00</u>	11. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))
<input type="checkbox"/> Reduction by 50% for filing by Small Entity \$ _____	12. <input type="checkbox"/> Prior Application is Assigned to: <u>E.I. du Pont de Nemours and Company</u> <i>(for continuation/divisional with Box 20a completed)</i>
<input type="checkbox"/> Cancel in this application original claims _to _of the prior application before calculating the filing fee.	13. <input type="checkbox"/> Preliminary Amendment
Charge \$ _____ to the above indicated Deposit Account.	14. <input type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i>
4. <input checked="" type="checkbox"/> Specification excluding Drawings [Total Pages] <u>22</u>	15. <input checked="" type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i>
5. <input type="checkbox"/> Drawing(s) (35 USC 113) [Total Sheets] <u>0</u>	16. <input type="checkbox"/> Transfer all references cited by Applicants or by the Examiner from the parent Application Serial No. filed_. A PTO-1449 listing the references is enclosed.
6. <input checked="" type="checkbox"/> Declaration and Power of Attorney [Total Pages] <u>4</u>	17. <input type="checkbox"/> Applicant Claims Small Entity Status
a. <input type="checkbox"/> Newly executed (original or copy)	18. <input type="checkbox"/> Other :
b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 19a completed)</i>	
c. <input checked="" type="checkbox"/> Unsigned Declaration <i>[Note Box 6 below]</i>	
i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).	
7. <input type="checkbox"/> Application Data Sheet 37 CFR 1.76	
8. <input type="checkbox"/> Incorporation By Reference (<i>useable if Box 6b is checked</i>) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 6b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.	

20. Priority Information, check appropriate box and supply the requisite information

a The accompanying application is a Continuation Divisional Continuation-in-part (CIP)
Of prior application No: filed .
Examiner: Group/Art: _____

21. CORRESPONDENCE ADDRESS

 Customer Number: 23906

Address E.I. du Pont de Nemours and Company

Telephone (302) 984-6058

Fax (302) 658-1192

22. RESPECTFULLY SUBMITTED,

Signature Name

Hilmar L. Fricke

Date

February 11, 2004

Registration No.

22,384

23. The Power of Attorney in the Prior Application includes: _____

Recognize as Associate Attorney: _____

Attorney

Registration No.

and address future correspondence to same as indicated in Box 21.

The invention was made by an agency of the U. S. Government or under a contract with an agency of the U. S. Government.

No.

Yes, the name of the U.S. Government agency and the Government contract number are: _____.

(preferred arrangement of specification set forth below)

- Descriptive title of the Invention
- Cross References to Related Applications
- Statement Regarding Fed sponsored R & D
- Reference to Microfiche Appendix
- Background of the Invention
- Brief Summary of the Invention
- Brief Description of the Drawings (*if filed*)
- Detailed Description
- Claim(s)
- Abstract of the Disclosure

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL for FY 2003

Patent fees are subject to annual revision.

 Applicant Claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 770.00)

Complete if Known

Application Number	Unknown
Filing Date	February 11, 2004
First Named Inventor	Carmen Flosbach et al.
Examiner Name	Unknown
Group / Art Unit	Unknown
Attorney Docket No.	FA 1179 US NA

METHOD OF PAYMENT (check all that apply)

 Check Credit card Money Order Other None Deposit Account:Deposit
Account
Number

04-1928

Deposit
Account
Name

E. I. du Pont de Nemours and Company

The Commissioner is authorized to: (check all that apply)

Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) during the pendency of this application
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)
1001	770	2001	385
1002	340	2002	170
1003	530	2003	265
1004	770	2004	385
1005	160	2005	80
			Utility filing fee
			Design filing fee
			Plant filing fee
			Reissue filing fee
			Provisional filing fee
		SUBTOTAL (1)	(\$ 770)

2. EXTRA CLAIM FEES

Total Claims	-20**	=	Extra Claims	Fee from below	Fee Paid
8	-20**	=	0	X 18	0
Independent Claims	1	-3**	=	0 X 86	0

Multiple Dependent X 290 = 0

Large Entity

Large Entity	Small Entity	Fee Description
Fee Code	Fee (\$)	Fee Description
1202	18	2202 9 Claims in excess of 20
1201	86	2201 43 Independent claims in excess of 3
1203	290	2203 145 Multiple dependent claim, if not paid
1204	86	** Reissue independent claims over original patent
1205	18	2205 9 ** Reissue claims in excess of 20 and over original patent
		SUBTOTAL (2) (\$ 0.00)

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1051	130	2051	65	Surcharge – late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	
1252	420	2252	210	Extension for reply within second month	
1253	950	2253	475	Extension for reply within third month	
1254	1,480	2254	740	Extension for reply within fourth month	
1255	2,010	2255	1,005	Extension for reply within fifth month	
1401	330	2401	165	Notice of Appeal	
1402	330	2402	165	Filing a brief in support of an appeal	
1403	290	2403	145	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive – unavoidable	
1453	1,330	2453	665	Petition to revive – unintentional	
1501	1,330	2501	665	Utility issue fee (or reissue)	
1502	480	2502	240	Design issue fee	
1503	640	2503	320	Plant issue fee	
1460	130	1460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
1806	180	1806	180	Submission of Information Disclosure Stmt	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1809	770	2809	385	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	770	2810	385	For each additional invention to be examined (37 CFR § 1.129(b))	
1801	770	2801	385	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	

Other fee (specify) _____

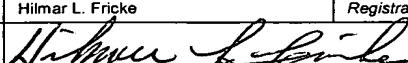
*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\$ 0)

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Hilmar L. Fricke	Registration No. Attorney/Agent)	22,384	Telephone	(302) 984-6058
Signature				Date	February 11, 2004

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038 Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop: Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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on February 11, 2004
Date



Signature

JEANNETTE Y. RAYFIELD

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POLYURETHANEUREA RESINS WITH TRIALKOXYSILANE GROUPS AND PROCESSES FOR THE PRODUCTION THEREOF

Application No.: Unknown

Filing Date: February 11, 2004

First Named Inventor: Carmen Flosbach et al.

Group Art Unit: Unknown

Examiner: Unknown

Attorney Docket: FA 1179 US NA

Fee Transmittal

Application – 22 pages

Application Data Sheet

Form PTO/SB/08a

Declaration/Power of Attorney (not executed) (4 pages)

Authorization to charge Deposit Account 04-1928

Receipt Cards